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Susan J. Hiles	(Depositor's name)
Susan J. Hiles	(Signature)
January 24, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/666,121	09/19/2003	Lyle Aaron Margulies	PTS103	8431

TITLE OF INVENTION: METHOD AND APPARATUS FOR MONITORING THE AUTONOMIC NERVOUS SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NATARAJAN, VIVEK	3735	600-324000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Garrison & Associates PS
 2. David L. Garrison
 3. _____

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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0684 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

David L. GarrisonDate January 24, 2006

Typed or printed name

David L. GarrisonRegistration No. 24,298

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Authorized Signature

Date January 24, 2006

Typed or printed name

David L. Garrison

Registration No. 24,298

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David L. Garrison
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CODE: 820
From: David L. Garrison *DLG*
Date: January 24, 2006
Serial No.: 10/666,121
Filed: September 19, 2003

Our Ref. No.: PTS103

Total Number of Pages, Including This Cover Page: 4

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